

Commonwealth of Virginia
Department of Professional and Occupational Regulation
Post Office Box 11066
Richmond, Virginia 23230-1066
(804) 367-0010
www.dpor.virginia.gov



Cemetery Board

TRUSTEE APPROVAL APPLICATION

CEMETERY COMPANY PERPETUAL CARE OR PRENEED TRUST FUND TRUSTEES THAT ARE NOT A VIRGINIA TRUST COMPANY OR TRUST SUBSIDIARY OR A FEDERALLY INSURED BANK OR SAVINGS INSTITUTION DOING BUSINESS IN THE COMMONWEALTH OF VIRGINIA, MUST BE APPROVED BY THE CEMETERY BOARD PRIOR TO THE TRANSFER OF FUNDS.

1. Cemetery Company Name

Enter the company name as it appears on the license.

2. VA Cemetery Company License No.

3. Type of Trust

Perpetual Care Trust Fund ☐

Preneed Trust Fund ☐

4. Name of Trustee

5. Is the trustee a business entity?

Yes ☐

No ☐ If no, please provide the following information, then skip to question #7.

Trustee's Employer

Employer's Address

6. Type of business (select only one)

Sole Proprietorship ☐

General Partnership ☐

Limited Partnership ☐

Association ☐

Limited Liability Company ☐

Corporation ☐

⌵ If your business is a Limited Partnership, Limited Liability Company, or Corporation, your business/trade name(s) must be registered with the Virginia State Corporation Commission. For additional information, contact the SCC at (804) 371-9733.

7. Trustee's Address

City, State, Zip Code

8. Trustee Contact Person

9. Trustee Contact Person's Title

10. Telephone & Facsimile Numbers

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Telephone

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Facsimile

11. Is the trustee a federally insured bank or savings institution?

Yes ☐

No ☐

12. Principals. List the name (first, middle initial, last, generation), title, address, and social security number of all company officers and directors (i.e., the sole proprietor, the partners of your partnership, the officers and/or directors of your association, the managers or members of your limited liability company, or the officers of your corporation).

Name	Title	Home Address	Social Security No. Σ
			- -
			- -
			- -
			- -

13. Provide a detailed description (including dates) of experience the trustee has as an individual trustee or an agent for a firm responsible for the management of a trust. Please attach supporting documentation (i.e., résumés, references, etc.).

14. Has the trustee or any of the principals listed in #12 ever been subject to a disciplinary action imposed by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, please provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

15. A. Has the trustee or any of the principals listed in #12 ever been convicted in any jurisdiction of **any felony** or **any crime of moral turpitude**, there being no appeal pending therefrom or the time for appeal having elapsed? *Any plea of nolo contendere shall be considered a conviction for purposes of this application.*

No ☐ Yes ☐ If yes, please provide the information requested in #15.C.

- B. Within the last five years, has the trustee or any of the principals listed in #12 been convicted in any jurisdiction of **any misdemeanor within five years of the date this application is submitted**? *Any plea of nolo contendere shall be considered a conviction for purposes of this application.*

No ☐ Yes ☐ If yes, please provide the information requested in #15.C.

- C. If you answered "yes" to either question #15.A. or #15.B., list the felony and/or misdemeanor conviction(s). Attach your original criminal history record and any other information you wish to have considered with this application (i.e., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation; etc.). If necessary, you may attach a separate sheet of paper.

Original criminal history records may be obtained by contacting the state police in the jurisdiction in which you were convicted. Virginia residents must complete a criminal history record request form in the presence of a notary public and mail it to the Department of State Police, Central Criminal Records Exchange, Post Office Box 27472, Midlothian, Virginia 23261-7472.

16. During the past ten years, has the trustee or any of the individuals listed in #12 had any outstanding judgments, outstanding tax obligations or defaults on bonds?

No ☐

Yes ☐ If yes, provide an explanation of the situation, including the beginning balance, current balance, and payment arrangements.

17.

Trustee's Signature

Date

18. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that I understand, and have complied with, all the laws of Virginia related to Cemetery licensure under the provisions of Title 54.1, Chapter 23.1 of the *Code of Virginia* and the *Virginia Cemetery Board Regulations*.

Signature of Officer, Director or Compliance Agent

Date

Σ State law requires every applicant for a license, certificate, registration, or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

THE APPROPRIATE FIDELITY BOND FORM MUST ACCOMPANY THIS APPLICATION.

APPLICATIONS AND SIGNATURES MUST BE ORIGINAL. FASCIMILE TRANSMISSIONS AND COPIES WILL NOT BE ACCEPTED BY THE BOARD.